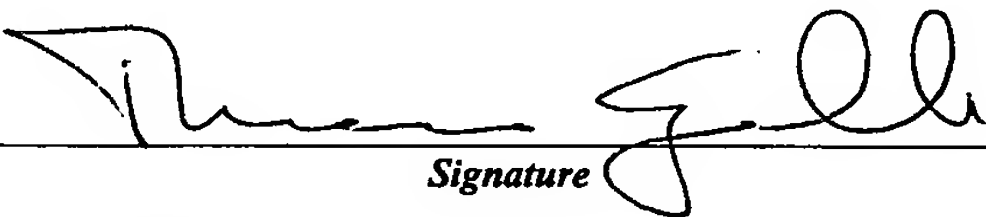
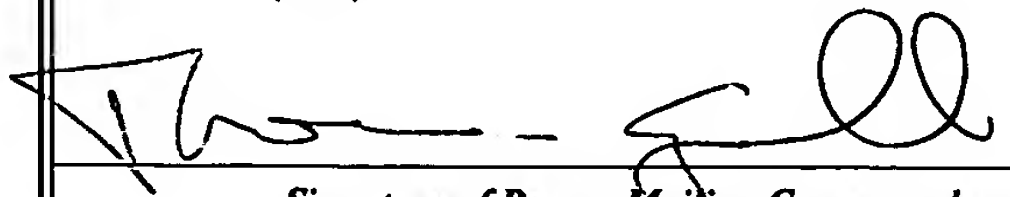
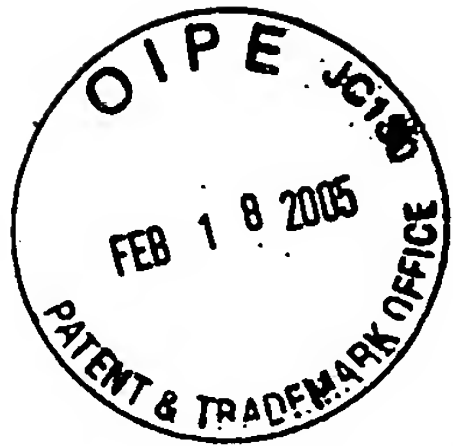


AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. 15226	
Applicant(s): Minoru Tsuruta						
Application No. 10/084,557	Filing Date February 26, 2002	Examiner Charles H. Sam	Customer No. 23389	Group Art Unit 3731	Confirmation No. 7971	
Inventor: MEDICAL RETRIEVAL INSTRUMENT						
COMMISSIONER FOR PATENTS:						
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	6 -	26 =	0	x \$50.00	\$0.00	
INDEP. CLAIMS	4 -	6 =	0	x \$200.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00	
<div><input checked="" type="checkbox"/> No additional fee is required for amendment.</div> <div><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____</div> <div><input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.</div> <div><input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 19-1013/SSMP<div><input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.</div><div><input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</div></div> <div><input type="checkbox"/> Payment by credit card. Form PTO-2038.</div> <div>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</div>						
<div> _____ <i>Signature</i></div> <div>Thomas Spinelli Registration No.: 39,533</div>			<div>Dated: February 16, 2005</div> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"><div>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on <div style="text-align: center;">2/16/2005 (Date)</div></div><div style="text-align: center;"><div> _____ <i>Signature of Person Mailing Correspondence</i></div><div>Thomas Spinelli <i>Typed or Printed Name of Person Mailing Correspondence</i></div></div></div>			
cc:						



3731 ^{28W}

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:	Minoru Tsuruta	Examiner:	Charles H. Sam
Serial No:	10/084,557	Art Unit:	3731
Filed:	February 26, 2002	Docket:	15226
For:	MEDICAL RETRIEVAL INSTRUMENT	Dated:	February 16, 2005
Conf. No.:	7971		

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE

Sir:

In response to the Office Action dated November 17, 2004, Applicant respectfully requests reconsideration of the above-identified application in light of the following amendments and remarks:

CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8(a)

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on February 16, 2005.

Dated: February 16, 2005


Thomas Spinelli